

# Town Meeting

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BULLETIN OF AMERICA'S TOWN MEETING OF THE AIR

Broadcast by Stations of the American Broadcasting Co.



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## What Is the Best Answer to Alcoholism?

*Acting Moderator, NORMAN COUSINS*

### *Speakers*

**SELDEN D. BACON**

**MAMIE WHITE COLVIN**

**JAMES J. SMITH**

**REVA BECK BOSONE**

*(See also page 13)*

### COMING

July 12, 1949

**Does the Socialist State Tend To Destroy  
Individual Initiative?**

July 19, 1949

**How Can the United States and France Help  
Promote a Stable and Prosperous Europe?**

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## THE BROADCAST OF JULY 12:

### "Does the Socialist State Tend To Destroy Individual Initiative?"



## THE BROADCAST OF JULY 19:

### "How Can the United States and France Help Promote a Stable and Prosperous Europe?"



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# Town Meeting

BULLETIN OF AMERICA'S TOWN MEETING OF THE AIR

GEORGE V. DENNY, JR., MODERATOR



JULY 5, 1949

VOL. 15, No. 10

## What Is the Best Answer to Alcoholism?

### Announcer:

Yes, friends, it's Town Meeting time here in New York City, and we welcome you to the last broadcast which will come to you from the United States for the next three months. Starting next Tuesday, July 12, at this same hour, your Town Meeting will come to you from Caxton Hall, London, when George V. Denney, Jr., and the American Broadcasting Company will bring you a discussion of the question "Does the Socialist State Tend To Destroy Individual Initiative?" The following week from the Grand Palais, Paris, the subject will be "How Can the United States and France Help Promote a Stable and Prosperous Europe?" Speakers for both broadcasts will be announced later on in this program.

In each of the twelve capitals the Town Meeting party will visit, the regular Town Meeting will be held with two Americans and two leaders of each capital participating. These programs will come to you in English each week at the regular Town Meeting hour.

But now, leaving world affairs for the present, we turn to a question which has been of great concern to the American people for generations. To preside over our discussion tonight, in the presence of George V. Denny, Jr., here is your guest moderator, Norman Cousins, Editor of *The Saturday Review of Literature*. Mr. Cousins.

### Moderator Cousins:

Good evening friends. I happened to learn the other day in reading a fascinating new book called *Flight from Reality*, by Norman Taylor, that the earliest records of civilization refer not only to bread but to beer. I also learned that the first brewery came into existence about 3700 B.C., and that a short time thereafter



the government began to collect taxes. All this might seem suggest that the subject of drinking is not only directly connect with death and taxes but has been with us for some time.

Measured in purely American terms, alcohol is a billion dollar yearly business—almost nine billion dollars, to be specific. Some sixty million people drink—four million of them too much for their own good, and about 375 thousand of them go by the name “problem drinkers.” Now when you have that many people involved in anything, you are certain to have problems, the most frequent one of which goes under the name “chronic alcoholism.”

Is alcoholism a disease, as many medical experts contend? If so, how can you best cure the disease? Or is abnormal drinking not a sickness but a weakness, a weakness which can be eliminated through discipline? Whether sickness or weakness, the basic question is our question tonight, “What Is the Best Answer to Alcoholism?”

Here tonight to explore this question with us are four persons who have thought a good deal about the problem drinker in our society and who have won national honors for their work in the field. We have Professor Selden Bacon of Yale University, Associate Editor of the *Quarterly Journal of Studies on Alcohol*. We have Mrs. D. Leigh Colvin, President of the National W.C.T.U., the Women’s Christian Temperance Union. We have Dr. James J. Smith, Director of Research on Alcoholism at the New York University Bellevue Medical Center, and we have Judge Robert Beck Bosone, Congressman from Utah.

Now, I wonder if the speakers would come up to the microphone, because before we get into the regular part of our program—the discussions themselves, the introductory talks—I’d like to have the speakers tell us exactly what each one means by the term “problem drinker.” Mrs. Colvin, how would you define and describe a problem drinker?

**Mrs. Colvin:** Mr. Chairman, I consider a problem drinker anyone who drinks and makes a nuisance to himself or his neighbors or can’t control his actions.

**Moderator Cousins:** Dr. Smith, do you agree with that?

**Dr. Smith:** I agree with that in general. I’d say that an alcoholic is a person who becomes financially and socially irresponsible because of drinking.

**Moderator Cousins:** Judge Bosone, how would you define a problem drinker?

**Judge Bosone:** I believe anyone who drinks too much, Mr. Cousins, is a problem drinker. A problem drinker is a person who

cannot be satisfied with one or two drinks but has to drink and drink until he becomes anesthetized.

**Moderator Cousins:** Dr. Bacon, do you go along with these three definitions?

**Dr. Bacon:** I would go along with those definitions, but I think I would add the idea of the compulsiveness of the drinking of the alcoholic.

**Moderator Cousins:** What do you mean exactly by compulsiveness?

**Dr. Bacon:** The man is dependent upon the use of alcohol just as we go on living.

**Moderator Cousins:** Thank you very much. Well, let's get on to the heart of the debate. Almost everyone, I suppose, has seen such moving pictures as "The Lost Week End," or has read such books as "The Story of Mrs. Murphy," in which incidentally, as you know, the central character was wedded to a bottle, or should say rewedded every time he opened a new bottle. Well, you know, this is no longer a joke, because we do have the problem drinker, and I wish that our first speaker, who has written some half dozen books on the problem of alcoholism, would tell us exactly how problem drinkers get that way. Dr. Bacon has written *Sociology and the Problems of Alcohol* and *The Mobilization of Community Resources for the Attack on Alcoholism*. He is Chairman of the Connecticut Commission on Alcoholism and the Director of the Section on Alcohol Studies of the Laboratory of Applied Physiology—whew—at Yale.

Dr. Bacon, now with all this firsthand experience, I am sure you can tell us just how problem drinkers get that way. Dr. Bacon. (Applause)

**Dr. Bacon:**

Thank you, very much. To define alcoholism, I will picture four types of chronic problem drinkers. The question is, "How do they get that way?" There are different pathways to alcoholism—some of them very long pathways before the stage of final obvious social responsibility has been achieved.

The first type may be pictured as a highly neurotic individual. He or she discovers that sedative alcohol is a remarkable means of temporarily forgetting insecurities, shyness, frustrations, disgust, fear of self and others. His progress to full fledged alcoholism will probably be the more rapid as his emotional illness is the more severe.

A second sort of development may be seen in the individual who has no problems, as do all of us, but who would hardly be labeled



neurotic. Through his use of alcohol, he unconsciously starts to pamper the weakest elements in his personality equipment. He does not appear a violent drunkard. However, with a few drinks he is able to live both more selfishly and more carelessly. Very gradually, his personality assets become rusty. Perhaps less gradually, his problems both from drinking and from his less effective self increase. Consequently, his need for alcohol increases.

Ten years may elapse from the first symptoms to appearance of the final stages of alcoholism. In the early stages, a trained observer would see this individual sneaking drinks, gulping drinks, occasionally suffering what is called a black-out, experiencing a few benders, increasing the number of times and the duration of times of drinking, rationalizing his drinking or avoiding any discussion of it at all. In the middle stage, solitary drinking and drinking to overcome hangovers become part of the pattern. Both social and psychological problems start to increase. Peculiar and devastating fears may develop. His behavior may start to appear neurotic. Occupational and marital problems may become acute. He may make various attempts to change or to eliminate his drinking pattern.

The final stages will show complete social disorganization and a psychological state approaching the insane. Some manifest the diseases of malnutrition or have episodes of delirium tremens. Until the last year or two of this process, the condition may be fairly successfully concealed.

A third category of obvious problem drinkers is composed of the drifters and derelicts who since childhood have been on the marginal members of the society. They differ in that they seem to like drinking. Alcoholics generally hate liquor and hate themselves for drinking. The drifters do not show the guilt or the remorse so characteristic of the alcoholic. This type is to be found in jails and missions the country over.

Finally, perhaps 15 per cent of the over-all alcoholic population is made up of the insane, the feeble-minded, and many epileptics. All of these are only secondarily alcoholics—their alcoholism is merely a symptom of a more serious problem.

In every case, alcoholism demands at least two preconditions. One, a damaged personality structure needing crutches of some sort. This alone, however, cannot cause alcoholism. There are many such individuals who do not use alcohol at all; many who use alcohol, but not as a crutch. The second precondition is the use of alcohol. This alone cannot cause alcoholism. Over 90 per cent of the users are not and do not become alcoholics.

In addition to the alcoholics, and they may number four million

ere are the wives or husbands and children of the alcoholics. They also are a part of the alcoholism problem, as indeed is the whole society.

What to do about alcoholism? Stop trying to meet the problem by moral lecturing and by urging the use of will power. We might as well urge a child not to have measles or an insane person to be rational. Stop all the buck-passing, trying to give all the responsibility of the problem to just one group, such as the physicians or the jailers, or the recovered alcoholics. Stop fighting, blaming, defending, and name-calling. No one ever solved a real social problem yet by getting into fights like the wets and the drys in which victory is more important than the problem.

And on the positive side, delegate time, money, and adequate personnel for research. The money now available is pitiful in relation to the size of the problem. Support rehabilitation. It works, saves money, it is the most effective way to achieve real prevention.

And finally, adopt a positive approach on a practical day-by-day basis, instead of a negative approach based on escapism, shame, and medieval punishment. With hard work and humility and cooperation, and, most important of all, public acceptance of the problem, real progress can be made. (Applause)

### **Moderator Cousins:**

Thank you, Dr. Bacon. Our next speaker, Mrs. D. Leigh Colvin, belongs to one of the fightingest husband and wife teams in the United States. You may recall that her husband, Mr. Colvin, has run for the presidency of the United States on a prohibition party ticket. Before becoming head of the W.C.T.U., Mrs. Colvin was Vice President of the National Council of Women. I might add that Mrs. Colvin holds many honorary degrees. One of them is a special degree from Staley College. The degree is D.A.O.—Doctor of the Art of Oratory. Mrs. Colvin, won't you tell us why you believe that return to prohibition is the best answer to alcoholism today? Mrs. Colvin. (Applause)

### **Mrs. Colvin:**

Mr. Cousins, I think the reason that I believe that is because under prohibition the number of alcoholic admissions to Bellevue Hospital went down from 11,000 and a few more to 2,000 the first year of national prohibition, and the number of admissions before prohibition, 11,000, was not exceeded until 1939 when 12,000 admissions to Bellevue Hospital resulted.

Alcoholism in my opinion can be reduced only if we get rid of what causes it. It can be cut to a minimum, but only as we reduce



drinking through making liquor less accessible. Judge Zottoli, of the Boston Municipal Court, and Horatio Pollack, a statistician for years for the New York State Hospitals, both show that admissions to mental hospitals, the number of crimes committed, and money spent because of poverty caused by alcoholism were reduced whenever liquor was made less available through local option or prohibition periods.

The American drink bill cannot be totaled without admitting that the money spent for drink is greatly augmented by the cost of drink associated—crime, insanity, disease, loss of income, juvenile delinquency, poverty, broken homes, and other human and economic waste. American drinkers are consuming three times as much hard liquor and wine and twice as much beer as in the first year of repeal. The number of alcoholics and drunkards has multiplied in fashionable communities as well as in the skid rows of the city. We have basement bars in homes instead of back alleys. Gaudy, lurid advertising of the distillers, winers, and brewers convinces the gullible and children that it's smart and fashionable to drink.

Enactment of the Langer-Bryson Bill in Congress to prohibit alcoholic beverage advertising in interstate commerce and over the radio would reduce drinking and alcoholism greatly. Drying up local option elections has minimized the problem in more than one-fourth of the country which is now dry or has banned hard liquor. National prohibition was, and would be again, the best answer ever devised to the problem of alcohol and alcoholism.

The problem of alcoholism increases and will continue to increase because of the accessibility of alcoholic drinks, and any method which will lessen the availability of securing alcoholic beverages will be the best answer to the problem of alcoholism. With 465,000 licensed outlets as compared with 177,000—the largest number before prohibition—and as much bootlegging as before repeal, and with \$150,000,000 spent yearly to induce people to drink and those who do drink to drink more, it's no wonder that alcoholism is on the increase. If only a certain number of those who drink become alcoholics, then the more people who do drink, the greater number of alcoholics we'll have. Prevention is much the better answer, rather than trying to reclaim people after they become alcoholics.

With \$44,000,000,000 spent in the last five years for two and three quarters billion gallons of liquor, you can see the tremendous financial problem the traffic is becoming. Arrests for intoxication exceed one and a quarter million in 1,600 cities representing about one-third of the population, according to the



F.B.I. crime reports. The Bureau of Census' report tells us that one out of every eight persons committed to overcrowded mental institutions and psychopathic wards of general hospitals is an alcoholic. Among these, the number of women alcoholics is increasing year by year. Some authorities estimate that there are as many as four million alcoholics and problem drinkers in the United States.

Alcoholism affects not only the person who drinks, but it affects his family and every taxpayer as well. Alcoholism is a national disease, a social and economic disease for which prevention by eradication of the cause is the best solution. It's a national disease growing from over 465,000 saloons and liquor stores. (Applause)

### **Moderator Cousins:**

Thank you, Mrs. Colvin. Our third speaker, Dr. James J. Smith, served with the O.S.S. in the war as Chief of the Medical Intelligence Section in Europe. He received his medical degree from Yale in 1940. Today, Dr. Smith is Director of Research on Alcoholism at the New York University Bellevue Medical Center, and he is a member of the faculty of the N.Y.U. Medical School in the Department of Medicine. Mr. Smith, what to your mind is the principal cause of problem drinking? Dr. Smith. (Applause)

### **Dr. Smith:**

I must begin by disagreeing with Dr. Bacon and Mrs. Colvin. I disagree with Mrs. Colvin because I know that the cause of alcoholism does not lie in the bottle, but in the man. Removing the bottle does not remove alcoholism. We must cure the patient to cure alcoholism. Since I feel strongly that alcoholism is a physical disease, I cannot agree with Dr. Bacon that emotional and mental disorder leads to alcoholism.

It is a good working rule in medical research that a problem is more than half solved when it is defined. I should like to define an alcoholic, and I should like to define him as he appears to you and as he appears to me.

As he appears to you in the community, an alcoholic is a person who is socially and financially irresponsible because of drinking. This has nothing to do with the amount he drinks, but is entirely a matter of how he behaves. As he appears to me, the alcoholic is a person whose body chemistry is different from that of normal. So to me an alcoholic is a sick person who is behaving poorly because his body is working poorly. Therefore I believe that the best answer to alcoholism is to treat the alcoholic patient. The only way to treat a patient for a disease is to understand the nature

of the disease. My understanding of alcoholism is that it is disease of the body, not of the mind, so that our treatment must be aimed at the body rather than the mind.

I know that this is not the usual understanding of the problem. Most people think the alcoholic is simply a person who is willfully misbehaving, and indeed his behavior is not acceptable to the community. However, before we pass judgment on a man's behavior, we must ask ourselves why does he behave as he does. Our everyday experience—yours and mine—shows us that people do not behave well when they do not feel well. Our children, for example, are fretful, obstinate, and disobedient for a day or two before they break out in a rash and a high fever. Then it dawns on us that we were scolding them for coming down with the measles.

What I'm driving at is this, that the bodily illnesses frequently show themselves as disturbances of behavior. In fact there is a growing awareness among physicians today that behavior disturbances are often signposts of bodily diseases. Therefore it is possible to change a person's behavior for the better by improving his bodily health. For example, a patient with severe anemia, who is suspicious, who thinks that people intend to harm him, and who thinks life is not worth living will feel well and will have a normal outlook on life only when his anemia is treated. Here, only by changing the inner workings of his body are we able to change his behavior.

Let me tell you how we know the patient of whom we talk has severe anemia. We heed the signpost of disturbed behavior and do laboratory tests. We examine his blood and determine the exact number of red blood cells he has. With this information, we are then able to treat him successfully. In the same way, we ask ourselves if it could be possible that laboratory tests would give us a clue to account for the misbehavior of the alcoholic. We have done laboratory tests on alcoholics, and we have found that the chemical workings of their bodies are different from those of the average person. The problem of alcoholism will be solved, then, when we devise treatment to restore the bodily chemistry of the alcoholic to normal.

Great progress has been made towards this goal. However, we must all realize that medicine cannot solve the problem single-handed. The alcoholic does not live with the doctor or in the hospital. He lives in the community. Here is where the question of alcoholism is really decided, for if the people in the community understand that the alcoholic is a person sick in body, and not someone to be shunned and cast off, it will become possible for

medical science to help both him and the community. Otherwise, the fate of the alcoholic will be decided by moral judgments rather than medical principles, and he will continue to be clapped into jail.

Medical science is nearer the solution of the problem of alcoholism than is generally suspected. We cannot give you the cure at this moment, but when the medical work in progress now results in the cure for alcoholism, we shall have the answer for the subject of tonight's discussion. (*Applause*)

### **Moderator Cousins:**

Thank you, Dr. Smith. Our final speaker tonight is Judge Reva Deck Bosone, the first woman elected to Congress from Utah. Before coming to Congress, she was the first woman ever to preside on a Utah court. I understand that she became judge at a time when Utah had one of the highest automobile accident fatality rates in the country. One of her first moves was to fine drunken drivers at the rate of \$300 per conviction. That took care of drunken driving. She was also Director of the Utah State Board of Education on Alcoholism. Recently, President Truman named Judge Bosone as chairman of the Committee of Laws and Ordinances of the President's Highway Safety Conference.

Judge Bosone, won't you tell the Town Meeting how you believe we can slow down the fast-moving problem of alcoholism in America? Judge Bosone. (*Applause*)

### **Judge Bosone:**

Thank you, Mr. Cousins. Dr. Bacon is right. There should be greater research. Maybe Congress can assist here. I disagree with Mrs. Colvin. I believe to prohibit is to stimulate. It is an incorrect method by which to solve alcoholism. (*Applause*) The more I ponder what Dr. Smith says about the number of alcoholics being fixed, that alcoholism is a disease of the body, the more I think in the light of my experience that he may be correct.

Many of you in this audience may still feel today as I felt thirteen years ago, when I went on the bench in Salt Lake City, Utah. You may look down your nose at the alcoholic just as I looked down mine. I couldn't understand at that time how anyone could lose himself in alcohol. Nor could I understand why so many men who came before me and promised so fervently that they would not touch another drop of liquor repeatedly came up before me on another drunk charge.

I, too, learned the truth. They meant what they said. They never intended to take another drop of liquor, and each time they thought they were through. So I gave them chance after chance,



but I found that about the only thing that worked was to give a lighter sentence if they could show that they had been out of jail longer this time than before. Down through the years I came to know many of these men by their first names. I found out that some of them had once been important people in the community—in communities in the north, east, and the south. I saw them both in and out of jail, and when they were sober, many of them were sweet and refined people. I knew something was wrong, but I didn't know what. I acquired a painful sympathy for them.

I had heard of Alcoholics Anonymous long before a chapter was organized in Salt Lake City, Utah. Alcoholics Anonymous is an organization of a spiritual nature. Its philosophy is based on twelve steps. As soon as one was established in Salt Lake City, I asked some of its members to come to my courtroom each morning. I then selected certain alcoholics from the bull pen to go to my chambers where A.A. could talk to them—and let me say here that not every alcoholic can be made sober through A.A., but thousands of them can. I saw them rehabilitated again and again. Alcoholics Anonymous has done a magnificent job. It has created much of the scientific interest in alcoholism and has inspired much of the study of it. And most important of all, through the efforts of A.A., literally thousands of men and women throughout the nation have become sober citizens, reestablished in life  
(Applause)

In Utah, I also had a part in developing an educational program on alcoholism. The Utah State Board on Alcoholism established two years ago by legislative action has a well-rounded program which provides alcoholics and their families a place where they may come for advice and assistance, and which coördinates public relations activities on alcoholism. As executive director, I saw it spread out from Salt Lake City to twenty other important towns and out of it comes what has been called one of the best high school programs on alcoholism in this country. The high school program is carried out with complete absence of the crusading spirit. There is no sermonizing, no moralizing.

When a speaker in a high school assembly starts out to discuss alcoholism, some of the students begin to titter because they abhor the temperance talk, but as the facts on alcoholism develop in an understandable and forthright manner, their attitude changes. I've seen them sit forward in their seats with breathless interest. The high school student, you know, is pretty much of a realist these days, and it's easy for him to see that the first sign a boy is an alcoholic is when he drinks more beer than the rest of his companions and gets a little high as he comes out of a juke-box joint with

friend. The high school student is interested in learning the signposts on the highway that leads to the black-out of alcoholism.

Yes, ladies and gentlemen, we've changed our thinking on drinking and on the drunk in the past few years. We now try to head off the alcoholic before he develops by showing him that he has a weakness, but if he does become an alcoholic, we do not consider him a derelict of society, but a human being who may be salvaged. (Applause)

### Moderator Cousins:

Thank you, Judge Boscone. Well, now let's have a little friendly rapid-fire session around the microphone. We'll see whether we can't get them to expand on their arguments, perhaps to sharpen their differences. Dr. Smith, I saw you making some notes. Won't you tell us what that last note was that you made? You seemed to be writing at a pretty feverish pace there.

**Dr. Smith:** Well, I made a note while Dr. Bacon was talking, when Dr. Bacon gave his definition of what an alcoholic was. He said in that definition that an alcoholic has to drink to go on living,

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## THE SPEAKERS' COLUMN

**MAMIE WHITE COLVIN** — Mrs. D. Leigh Colvin is national president of the W. C. T. U. and is first vice president of the World W. C. T. U. A graduate of Wheaton College (B.A.), and of Houghton College (LL.D.), she is also the recipient of a degree of Doctor of Art of Oratory from Staley College of the Spoken Word, and has won numerous awards in national oratorical contests.

Mrs. Colvin was prohibition candidate for Congress (special election) in 1918. She is editor of *Union Signal*, the official organ of the W. C. T. U., and is a contributor to temperance periodicals.

**JAMES J. SMITH** — Dr. Smith is director of research on alcoholism in the Department of Medicine of the New York University Bellevue Medical Center, New York City. During World War II, he served with the O.S.S. as chief of the Medical Intelligence Section for the European Theater.

**REVA BECK BOSONE** — Democratic member of the House of Representatives from the Second Congressional District of the State of Utah, Mrs. Bosone was elected to the 81st Congress in November, 1948. A graduate of the University of California at Berkeley (B.A.) and the University of Utah (LL.B.), she taught school for seven years before entering the field of poli-

tics. She was municipal judge of Salt Lake City for three terms.

A former director of the Utah State Board for Education on Alcoholism, she was named to the Utah Hall of Fame in 1943 for her work done in the fields of juvenile delinquency and rehabilitation of alcoholics.

**SELDEN D. BACON** — Dr. Bacon is secretary-treasurer of the National Committee for Education on Alcoholism, Division of Yale Plan on Alcoholism. He is also chairman of the Connecticut Commission on Alcoholism and is the author of several books on the problem of alcoholism.

**NORMAN COUSINS** — After his graduation in 1933 from Teachers College, Columbia University, Mr. Cousins became an editorial writer for the *New York Post*. After one year at this job, he joined the staff of *Current History*, where he remained for five years as literary editor and managing editor. In 1940, he became executive editor of the *Saturday Review of Literature*, and since June, 1942, he has been the editor.

From 1943-45, Mr. Cousins served as chairman of the editorial board of the Overseas Bureau of the Office of War Information. He is the author of several books, including *The Good Inheritance*, *The Democratic Chance*, and *Modern Man Is Obsolete*.

and I think he's right. I think the alcoholic needs something in the chemical workings of his body which he thinks alcohol will supply. Actually, he's mistaken; we will give him something better. But he is quite right—he does need something to go on living.

**Mr. Cousins:** Mrs. Colvin, do you believe that the alcoholic needs something to go on living? Does he actually need alcohol?

**Mrs. Colvin:** I don't think he needs alcohol, because in every method of cure or rehabilitation alcohol can be taken away absolutely and the man has a chance of being rehabilitated. He has no chance at all if he continues to take alcohol.

**Mr. Cousins:** Just before we went on the air, someone in the audience suggested that anytime someone really has a craving for alcohol, all he has to do is to take some hot water and lemon juice, and he'll get over it. We pass it along to you with the compliments of the sponsor. (*Laughter*) Dr. Smith, you were going to come back?

**Dr. Smith:** I was going to say, with regard to Mrs. Colvin's talk, that you can't legislate human behavior. I think it's also important, too, to realize that society is not responsible for the sins of the individual, but that the individual is responsible for the sins of society. (*Applause*)

**Dr. Bacon:** Well, I would like to ask a very direct question of Mrs. Colvin. In view of the fact that certainly more than 90 per cent of all the users of alcohol do not become alcoholics, how does she justify her statement that alcohol is the cause of alcoholism?

**Mrs. Colvin:** Because I don't believe anyone ever was an alcoholic until he had some alcohol. (*Laughter*) There are many different physicians who disagree with Dr. Smith and Dr. Bacon. For instance, the physician for the Du Pont plants says that it's not a disease—it just comes out of a bottle. So that after all I think that alcohol is the thing that causes alcoholism.

**Dr. Bacon:** I'd like to come back to that one. In the same way, we might say that gasoline is the cause of traffic accidents. You can't have a traffic accident without gasoline.

**Mr. Cousins:** Judge Bosone is the expert on traffic accidents, so I think she'd like to say something.

**Judge Bosone:** Well, I'd just as soon not get into traffic accidents, because, after all, the alcoholic isn't the only problem when it comes to traffic. And I suppose, Mrs. Colvin, you'll be glad for this statement—one or two drinks is enough to make a driver a hazard on the highway. Mrs. Colvin, I would like to ask you about your stand on prohibition—if you think that is the remedy. It seems to me that alcohol has just about been in the category of the venereal



diseases. It's secretive. It's something we haven't in the past been talking about. In order to deal with alcoholism, don't we have to bring it out in the open? Now, if we push it back into the barn and under the kitchen sink, are we going to get at the alcoholic?

**Mrs. Colvin:** I don't believe in pushing it back. I think it's wonderful that people are interested in it, but it seems to me that the way to get rid of it is not through education, because Judge Bosone didn't use education with her traffic accident cases out there—she enforced the law, and she gave a higher penalty—I noticed that—instead of trying to educate them.

**Judge Bosone:** Well, I don't know that I have anything further to say on traffic, but I do know that many of the hundreds of alcoholics that I know claim, anyway, that they believe they became alcoholics during the prohibition days. (*Applause*) It was the smart thing to drink, and so they went into hidden recesses to take that drink. (*Applause and dissents*)

**Mr. Cousins:** Well, I can see, ladies and gentlemen, that we're going to be in for a very interesting question period. For our listeners across the nation and abroad, the following message.

**Announcer:** Well friends, you've heard the opinions of our speakers on the question, "What is the Best Answer to Alcoholism?" Now, what's your opinion? Perhaps you'd like to ask our speakers some questions. In just a moment, we'll take those questions from this representative audience here in the ABC Playhouse in New York City. In the meantime I want to remind you that you may secure your copy of tonight's Town Meeting, complete with questions and answers, to follow, if you'll send 10 cents to Town Hall, New York 18, New York. Please don't send stamps, and allow about two weeks for delivery.

During these past weeks the interest in the Town Meeting Round-the-World Tour has been growing daily. And this interest is reflected not only in many newspaper and magazine articles, but in the individual listener getting in touch with his or her own local radio station. Reports from the stations of the American Broadcasting Company tell us of the thousands of requests they have received for information concerning the tour. If you should want a schedule of dates, origination points, and programs we will be very happy to send this information direct to you from Town Hall.

Now for our question period, we return you to Mr. Cousins.

# QUESTIONS, PLEASE!

*Lady:* Dr. Bacon, how practical and accurate is the use of the alcoholometer in tests for drunkenness?

*Dr. Bacon:* The alcoholometer, which was invented by a co-worker of mine at Yale, will tell very exactly what the concentration of alcohol is in the individual. It can be of great use in working with alcohol or drunken-driving charges. I don't believe, except for research purposes, that its use in the matter of alcoholism is very significant.

*Mr. Cousins:* I'm just a little curious there, myself, Dr. Bacon. How about this big balloon that you're supposed to blow into? Is that out of use now?

*Dr. Bacon:* That is another technique. You're getting a little out of my field, by the way. That is another technique. I don't believe that it's quite as foolproof or quite as useful in court operations as is the alcoholometer.

*Judge Bosone:* I don't think that it has been accepted in too many of the courts as to whether it's good evidence or not. There's where the debate is.

*Lady:* I would like to speak to Mrs. Colvin. What effect had prohibition on reducing alcoholism?

*Mrs. Colvin:* I said a while ago that it had a very serious effect on reducing alcoholism. It not only reduced the number of new offenders, the new commitments to the hospitals, but it also stopped the many old drunks coming in. The alcoholic ward at Bellevue Hospital was closed. They used to fingerprint the new admissions so that they could tell which ones were first offenders and how many were repeaters. And the number went way down there. It went down in our commitments to the hospitals. There was less alcoholism under prohibition than there has been since. In fact, the research councils and A.A.'s—all of these things have come up since, because of the terrible increase in the number of alcoholics in this country.

*Dr. Bacon:* I would like to point out that during the first year of prohibition it is quite possible that the intake of alcoholics went very far down, just as I believe the purchase of alcohol beverage went down. It took quite a while for the American public to find out how it was going to get its alcohol beverages in a new way. One of the largest chains of—shall I call them drying-out stations for alcoholics—was so afraid of what was going to happen that it closed all but one of its many institutions all over the country and bitterly regretted the step.

Now, as to the lowered record, don't believe too many—and I'

guilty of this, by the way—don't believe too many of these figures of alcoholism in the year 1927, or October 3, or 1936. Remember, so much of this recording depends upon the whim of the admissions officer at a hospital and depends upon the belief of the alcoholic as to whether he will get any help. That's one of the reasons the alcoholism rate is going up today. The real rate isn't going up. It's because people are coming for help who prior to this would not come. That will make an artificial swelling of the rate. (*Applause*)

*Mrs. Colvin:* May I suggest that Dr. Bacon has proved my point, because he said when they couldn't purchase, then we didn't have the alcoholics, and that's exactly what I want to do. (*Cries of dissent*)

*Dr. Bacon:* No, I said that for a year or two you had a reduction in consumption. I did not say there was any reduction in the number of alcoholics. I don't believe anybody can say that, because there are no figures.

*Mrs. Colvin:* But you said that there was a reduction in purchase, and they didn't learn how to get it.

*Dr. Bacon:* It took them about 18 to 24 months to learn a new technique. (*Laughter*) I think a new prohibition law would have the same effect.

*Judge Bosone:* Dr. Bacon, I think the technique was pretty good during the years 1920 to 1933. There were 652,657 criminal cases under the National Prohibition Act.

*Man:* My question is directed to Judge Bosone. Would you testify as an expert witness in an action on a disability policy that alcoholism is a disease and not a self-inflicted injury?

*Judge Bosone:* Well, now, I think that certainly has some legal implications. First of all, I wouldn't testify as an expert. What I know about alcohol I gained from handling alcoholics. I'm not sure that I would. I can say here from the hundreds of cases that I've handled that certainly it's a disease, it's a disorder, it's a dis-something. I don't know what it is. That's for research to find out, and I don't know that I would testify in the first place. (*Applause*)

*Man:* Dr. Smith, what medical remedies are effective for preventing habitual drinkers from continuing drinking? Does medical science know a cure?

*Dr. Smith:* Medical science does not have an absolute cure in the sense that we can take alcoholics into the hospital and turn them back to society as completely rehabilitated. However, we are working on procedures and are developing procedures which, in the near future, will result in reasonably good treatment for alcoholics.



While I'm here at the stand I would like to make a note about the consumption of alcohol. If we take a special period, such as 1920 and 1922 and 1923, we may get some figures. I think it's much better to look over the sweep of history and to take the last hundred years, where it becomes obvious that the amount of alcohol consumed, as alcohol, has varied by less than one per cent per capita in the last hundred years. (*Applause*)

*Lady:* Dr. Bacon, is alcoholism, or the tendency to become alcoholic, hereditary?

*Mr. Cousins:* Can you get it through your genes?

*Dr. Bacon:* "Is alcoholism hereditary" is a question that I think has made more sense to more people over a longer number of years than almost any other. The answer, so far as I know, is *absolutely not*. It is true, however, that in the families of alcoholics, or in the families of disordered or maladjusted people of any sort, you will find in the next generation more alcoholics and more disordered people of any sort.

*Mr. Cousins:* Dr. Smith, how would you answer that question?

*Dr. Smith:* Well, I disagree flatly. From my experience with alcoholics at Bellevue Hospital, and I daresay I've seen about ten thousand of them, I would say that alcoholism is definitely a hereditary disease. I think that a person is born an alcoholic in the same sense that a person is born a diabetic. He may not show his alcoholism until he's the age of twenty, thirty, or forty, but he has the tendency to alcoholism from the moment he's born. That's why we see certain racial groups who are alcoholics and certain racial groups who are not alcoholics. I don't think that if anyone has studied the problem from the medical point of view he can deny that there are definite hereditary traits to alcoholism.

*Mr. Cousins:* Dr. Bacon, what do you think of that?

*Dr. Bacon:* I think that will be found to be disagreed with in most of the literature on alcoholism. Apparently Dr. Smith will accept, however, the fact that there are racial differences on this point. I would have to ask him immediately to explain the differences between the sexes which, in this country, would seem to be about six to one; in another country, another culture, would seem to be about two to one—say in England, before the war; or would be about 27 to one—27 male alcoholics to one female; and when they come to this country, the ratio tends to approach the American rate. Furthermore, how, on physiological grounds, will he explain, let us say, the very low rate among members of certain culture groups such as the Jews and a very high rate among other groups such as so-called "old-white" Americans, those of Irish or Polish ancestry?

*Mr. Cousins:* Dr. Smith, we want some more evidence on the fact that you believe that alcoholism is hereditary.

*Dr. Smith:* I'm very glad that Dr. Bacon brought the point up. Usually in explaining why the Irish and the Scandinavians, for example, are the most prolific alcoholics, and why the Jews and the Chinese are very seldom alcoholics, one brings forward the matter of climate, the matter of religion, the matter of cultural background, and that sort of thing. However, these four groups, no take them as representative, are groups which marry within their own group quite commonly. If there is a disease in a group and the group marries within itself, you will find that disease occurring very frequently. For example, diabetes is much more common among the Jews than it is among any other group.

Also, certain diseases of the blood vessels are more common among the Jews than among any other group, and that is because they have married within their group quite commonly. If a group marries within itself commonly and the disease is not present, you very seldom see it, which is true of alcoholism. However, among the Irish and Scandinavians, who also marry among their own groups, you find this disease, alcoholism, cropping up quite frequently.

As to sexes, I'm quite glad he brought that question up, because that is exactly one of the things we're working on at Bellevue Hospital. We believe that the function of the endocrine glands has a great deal to do with whether or not a person is an alcoholic, and of course male and female are quite different, endocrinologically. (*Applause*)

*Judge Bosone:* I don't care what the theories are. Of the hundreds of cases, yes, the thousands of cases, that I've handled, there hasn't been one exception. In each case of alcoholism, somebody in the family has been alcoholic. I agree definitely with Dr. Smith. I think it works out. The evidence is there.

*Dr. Bacon:* I'd already pointed out the fact that there is going to be a larger percentage of alcoholics in the next generation, not on grounds of inheritance. But I would further like to ask Dr. Smith, why, if this is a physiological disease which can be inherited through some malforming of structure, I suppose, how is it that through psychotherapy, through joining Alcoholics Anonymous, through counseling, and through various nonmedical, nonphysical structure-changing therapies, there has been the greatest success by far of all therapies? (*Applause*)

*Dr. Smith:* I'd like to say in answer to that question that I don't know personally how well Alcoholics Anonymous works. I think it does help some people, but I don't think that their statistics can

be relied upon. I don't think that we have the answer yet. We must remember that Alcoholics Anonymous has done a lot for the alcoholic, but it has done it when no one else has been doing anything. I think that Alcoholics Anonymous is a rather early or primitive organization which is helping the alcoholic, but it will be superseded by the advances of medical science. (*Applause*)

*Man:* My question is directed to Mrs. Colvin. Instead of a return to prohibition, since it failed when tried before, how about nationwide educational programs to convince one of the dangers?

*Mr. Cousins:* Mrs. Colvin, how about education instead of prohibition?

*Mrs. Colvin:* Well, of course, I believe in education, but I believe that education without prohibition doesn't get very far. May I instance the fact that the governor of this state, who is very much interested in FEPC, recently was quoted as saying that the law itself was a great educator, that he wasn't trying to get it enforced, because the fact that it is there and it's the law has a great educational effect upon the people who employ other folks. So that law is education, and I can't quite see how all the education that we're doing can possibly match the miseducation that we see on the billboards and in full-page advertisements that the liquor people are putting out all the while that it doesn't hurt you unless you take it to excess. (*Applause*)

*Mr. Cousins:* That sets the stage for Judge Bosone.

*Judge Bosone:* Mrs. Colvin, the best law in the world cannot be enforced without sentiment being behind it, and I don't believe sentiment would be behind prohibition. (*Applause*)

*Mrs. Colvin:* And may I say that there was never a law passed in the United States that had more sentiment back of it, that was passed by a greater number of votes in the legislature—(*Cries of dissent*). Well, just look up your history. You don't have to fight with me. I'm only telling you what happened. The legislatures of the states passed it unanimously—36 states—in the biggest vote in the states by the legislatures and in state-wide votes. Now just look it up yourself, don't quarrel with me. (*Laughter and applause*)

*Dr. Smith:* I'd like to interject an historical note here. We're talking about what we ought to tell people to do and whether they'll do it or not. I think the best thing to do is to look back and see what they have actually done from time immemorial. It's recorded in the Book of Genesis that when Noah got out of the Ark he did two things. The first was to build an altar and the second was to plant a vineyard, and he became drunk from drinking the wine of the vineyard. (*Laughter and applause*)



*Lady:* I would like to ask Judge Bosone a question, if I may. What type of education course might be given in the public school which would enlighten the high school student on the subject of alcoholism?

*Judge Bosone:* I'm so glad you asked that. We're very proud of our high school program in the State of Utah. I think it's the only state that has a high school program.

We first of all went to the student body with a program. We made a statement of the case, and then there were certain Alcoholics Anonymous members who dared to come forth before the public and say they were alcoholics. We have one little woman in the State of Utah who has done a phenomenal job. She was with the group. It was rather difficult for her to stand before an audience of students or a public audience and say she was an alcoholic, but she did. They feel they have some mission to perform, and it is not exhibitionism. They're sincere in their missionary work. These alcoholics went on the program, and we used about three or four of them, each of them with a different history of drinking, but all following this pattern—that they began to drink when they were sixteen and seventeen years of age and that they became alcoholics by the time they were 29. That's the reason we began with a high school program in the State of Utah.

Now after the program which seemed to be so fascinating to them—and they took it so seriously, these kids did—we left textbooks—we called it a textbook—titled *The Alcohol Problem Visualized*. There is no sermonizing in that book—alcoholism is visualized. And we left sufficient numbers of that textbook for each of the high schools that we visited, and we covered most of the high schools in the State of Utah.

*Mrs. Colvin:* May I say just a word?

*Mr. Cousins:* Oh, certainly, Mrs. Colvin.

*Mrs. Colvin:* That the Woman's Christian Temperance Union helped write that alcohol textbook. (*Laughter and applause*)

*Man:* Dr. Bacon, won't building a world free from economic and emotional insecurity eliminate the desire to escape from reality by excessive drinking?

*Mr. Cousins:* If a man has a good job, does he have to drink, Dr. Bacon?

*Dr. Bacon:* Well, I think we will avoid not only alcoholism, but almost all of the other individual ills you can think of when we have that world. I'm all for it.

*Dr. Smith:* I'd like to interject another note here. Going back again to the Scripture and taking up the lead that it may be personal problems that cause alcoholism, I'd like to recount the

example of Job, who sat on a fermenting pile of refuse for a number of years and yet did not become an alcoholic, despite all his problems. (*Laughter*)

*Mr. Cousins:* Well, we have time for one more question. Young lady at the left.

*Lady:* Judge Bosone, if members of Alcoholics Anonymous believe in staying away completely from liquor, why wouldn't they accept Mrs. Colvin's suggestion for national prohibition?

*Judge Bosone:* The members of Alcoholics Anonymous that happen to know do not believe in staying away from alcoholic beverages. They may serve it in their own homes, but they say or the member says, that he is an alcoholic and it is not for him but he does not prohibit anyone else from drinking.

*Mr. Cousins:* Thank you, Judge Bosone. Well, now while our speakers prepare their summaries, here's a special message of interest to you.

*Announcer:* With the variety of subjects which will come to you during the next three months from the Round-the-World Town Meeting, we urge you right now to begin organizing discussion groups to listen to these broadcasts. You will hear the first program at this hour next Tuesday. So won't you be a modern Town Crier and tell your friends—call them on the telephone—speak to them on street corners—and in clubs? Help to keep your country fully informed and prepared for the leadership that is our responsibility. Because we Americans have the greatest responsibility for world leadership today, we want to do our part to help our people everywhere know and understand the people and the problems of other countries, and how and what they think. On each Town Meeting program for the next three months you will hear two people who are citizens of the country in which the program originates and two American speakers, and the audiences will be largely residents of each country visited. So won't you tell your friends as you follow the Town Crier's bell—freedom's bell—around the world?

Now for the summaries of tonight's discussion, we return you to Mr. Cousins.

*Mr. Cousins:* For our first summary, may we hear from Judge Bosone?

*Judge Bosone:* To the alcoholic: he should follow the advice of Alcoholics Anonymous and admit he is an alcoholic. By that, half the battle is won right there. The attitude of the public toward alcoholism will be changed as the cause of alcoholism is studied and understood. Alcoholics Anonymous, clinics, farms for alcoholics, and research will all be of tremendous assistance, but



most important of all is that the youth of the nation through a state high school program be apprised of the signposts that lead to the black-out of alcoholism, then we can trust their intelligence. And as for me, I'll gamble on the youth of this nation. (*Applause*)

*Mr. Cousins:* Thank you, Judge Bosone. Next, we hear from Mr. James J. Smith.

*Dr. Smith:* The best answer to alcoholism is to treat the alcoholic patient. Laboratory and clinical studies have shown that alcoholism is a physical disease. Research now in progress will result in a medical cure for alcoholism. However, to achieve its goal more speedily, medicine must have public understanding of the nature of the problem. Just as there is support for research into the causes of cancer and heart disease, there should be support for research on alcoholism. (*Applause*)

*Mr. Cousins:* Thank you, Dr Smith. Your summary, please, Mrs. Colvin.

*Mrs. Colvin:* I believe in education and I believe that the alcoholic himself should be educated, and I think that the young people in the schools and older people, too, should know the danger there is even in the first glass of alcohol. There is no way absolutely of telling in advance whether one will become an alcoholic or not, so that the danger is ever present even though the percentage of the number of those who become alcoholics may be small. I believe that we should get rid of the cause of alcoholism, and that, in my opinion, is alcohol. (*Applause and cries of dissent*)

*Mr. Cousins:* Your final summary, Dr. Bacon?

*Dr. Bacon:* I want to agree with Dr. Smith that research is of the greatest importance, but even before that comes an appreciation on the part of the public that this is a problem, that it is no longer to be avoided by saying it ain't so, by running away, or by punishing people who are poor and who are drunks. We want more people to help get in this attack on alcoholism. I would suggest such organizations as the National Committee for Education on Alcoholism working through communities throughout the country. If we get together and are serious, we can do it. (*Applause*)

*Mr. Cousins:* I'd like to thank our speakers, Dr. Bacon, Mrs. Colvin, Dr. Smith, Judge Bosone, and also our audience for their contributions tonight in bringing the question of alcoholism squarely before the American people.

Next Tuesday, at the same time, your Town Meeting will come to you from Caxton Hall in London, for a discussion of the question "Does the Socialist State Tend To Destroy Individual Initiative?" Captain Peter Thorneycroft, Conservative member of



Parliament, and Robert Byfield, member of the New York Stock Exchange, will take the affirmative; Harold J. Laski, professor of the University of London, and Max Lerner, columnist of the *New York Post*, will support the negative. The following week in Paris Mademoiselle Eve Curie, co-publisher of the *Paris Presse*, Claude Bourdet, Editor and publisher of *Combat*, James B. Carey, Secretary-Treasurer of the CIO, and Milton Katz, United States Deputy Representative for ECA in France, will discuss the question "How Can the United States and France Help Promote a Stable and Prosperous Europe?" George V. Denny, Jr., will return as your moderator. We invite you to be with us next Tuesday and every Tuesday at the sound of the crier's bell.